



X-Plain[™]

Upper GI Endoscopy

Reference Summary

Introduction

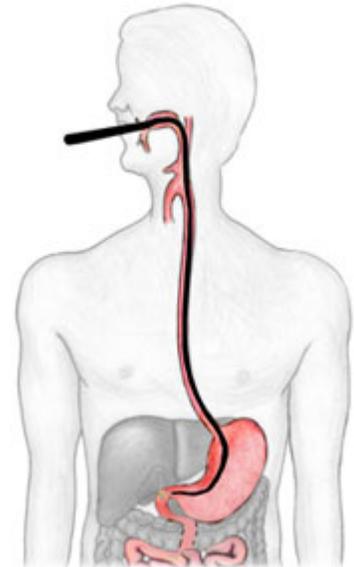
Upper GI endoscopy is a medical procedure that uses a scope to look inside the upper part of the digestive system. It also allows your doctor to diagnose and, in some cases, treat problems. This procedure is also known as EGD.

Your doctor has recommended that you have upper GI endoscopy. The decision to have this procedure is also yours.

This reference summary explains EGD. It discusses the benefits and risks and what to expect after this procedure.

Anatomy

The digestive system helps the body digest and absorb the food we eat. Swallowed food goes through the esophagus, the feeding tube.



The swallowed food then passes through the stomach where it is partially digested.

Food goes from the stomach to the small intestines where nutrients are further digested and partially absorbed. The beginning of the small intestines is called the duodenum.

Fibers and digested food finally reach the colon. In the colon, the rest of the nutrients get absorbed and stools are formed. Stools are then stored in the last part of the colon before being excreted.

The digestive system is also called the gastrointestinal system or GI. Its internal lining consists of special tissue.

The “upper GI” consists of the esophagus, the stomach and the duodenum.

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Endoscopy

Endoscopy is a special technique for looking inside the body. The doctor uses an endoscope during the procedure. An endoscope is a long, thin, flexible, fiberoptic tube that transmits pictures.

The physician can either look directly in the scope or can see the pictures projected on a TV monitor. This procedure will show more details than pictures taken with X-ray.

The endoscope has an open channel that allows for instruments to be passed in order to take tissue samples, cauterize bleeding, or remove polyps.

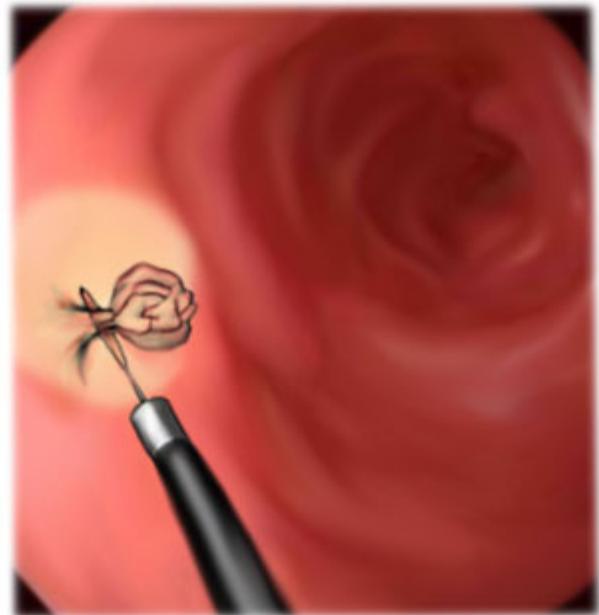
The doctor that performs endoscopy to examine the upper GI is a gastroenterologist, a specialist in the digestive system.



Various GI symptoms can be investigated with an EGD. These include pain in the stomach or abdomen, difficulty swallowing, vomiting, bleeding, ulcers, tumors, indigestion, and chest pain. Clear and detailed images and video projected on the monitor help the doctor diagnose the problem.

In some cases, an endoscopy procedure can be used to treat the disease. For instance, if polyps are found in the duodenum, they can be taken out. Polyps are abnormal growths of the GI lining. Polyps start out as non-cancerous tumors. However, some types of polyps can grow to become malignant. If you have a polyp, your doctor will take it out and send it to be tested under a microscope to determine its type.

Cancerous growths, if any are found, can also be taken out for further examination. This is called a biopsy. Biopsies are



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also done to test for certain bacteria that cause ulcers.

Active ulcer bleeding can also be treated during the endoscopy. If a source of bleeding is found, it can be cauterized and the bleeding stopped.

Your doctor will tell you the reason why an EGD has been recommended for you.

Preparation

Endoscopy is usually an outpatient procedure. This means that you will go home after the procedure. It can be done in the physician's office, a GI clinic, or at the hospital.

You should not eat or drink within eight hours of your scheduled procedure. Food in the upper GI will block the view and hinder the examination. In addition, it can cause vomiting, creating complications. If you are taking medicines, ask your doctor whether you should take them before the procedure.

You should stop the use of aspirin or aspirin containing products, as well as over-the-counter pain medications such as Excedrin, ibuprofen, Motrin, Advil, Aleve, or similar products 7 days before the procedure. Taking such products can increase the risk of bleeding during or after the procedure. After your procedure, your doctor will tell you when it is safe to restart these medications.

You should not smoke after midnight the day before the procedure.

Tell your doctor about any medical problem you have. Problems with the lungs and heart, for instance, may require special treatment before, during, and after the endoscopy. Also, if you are a diabetic, please inform the person scheduling the exam that you will need an early appointment time.

Tell your doctor about all the medications you are taking. For instance, if you take blood thinners you may need special medications. Some patients may need to take antibiotics before the procedure. Also inform him or her if you have any allergies. This will help your healthcare team select the analgesic for you. This is the medication that will numb you so you won't feel any pain.

You will be asked to remove your shirt and put on a gown for the procedure. Also, if you wear glasses, dentures or partials, you will be asked to remove them before the



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procedure. You may want to bring an eyeglass case with you to put your glasses in, a denture cup will be provided for you.

When you are ready to go home, you should not drive a car. Arrange for somebody to drive you home.

Procedure

The doctor will give you a local anesthetic to numb your throat. This may be a spray or a medication to gargle with. A special piece may be placed in your mouth to support it. You will lie on your left side.

During the procedure, you may be given a sedative medication to help you relax, or you may be given a medication that will put you to sleep during the procedure. It is important for you to try to relax and take slow, deep breaths through you nose. Every effort will be made to maintain your comfort and safety. Most patients sleep through the procedure. Your blood pressure, pulse, and oxygen level in your blood will be monitored. The procedure usually takes about 5 to 10 minutes to complete.

You should feel no pain during the procedure and you will be able to breathe on your own. You will feel the pressure of the endoscope as it is inserted. The endoscope will blow some air into your stomach so that the doctor can see well. Some patients consider the test slightly uncomfortable. However, patients' tolerance varies.

The esophagus, stomach, and duodenum are examined carefully during the EGD. Your doctor will look closely at areas that require evaluation, diagnosis, or treatment. He or she will look for inflammation, bleeding, abnormal growths, or other abnormalities.

If the doctor sees suspect tissue, he or she will take a sample for examination under the microscope. This is called a biopsy. Biopsy is helpful in examining abnormal growths to determine if they are cancerous. It can also help determine if a bacteria causing ulcer is present. The biopsy results are usually available few days later.

If active bleeding is found, such as bleeding caused by an ulcer, the doctor can coagulate the bleeding blood vessels using the endoscope.

At the end of the examination, the doctor will withdraw the endoscope and you will be taken to a recovery room to wait for the effect of the medications to wear off. This may take up to one hour. You will then be discharged to go home. Your doctor may give you the preliminary results before discharge. If any biopsy was done, these results may not be available for a few days.

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Risks

An EGD is a safe procedure. Complications are rare, however they can occur. You need to know about them just in case they happen.

Some patients may be allergic to the sedative used. Tell your doctor if you have any allergy before the procedure. This will help him or her pick the right sedative for you.

Bleeding could happen. This is rare, but more likely if a biopsy is performed or if the patient takes blood-thinning medication. Bleeding, if it occurs, resolves on its own and in rare cases may require blood transfusion. In extreme rare cases surgery may be needed.

The lining of the digestive tract can be perforated. This may require surgery to repair it. This is also very rare.

Complications from existing heart or lung diseases can occur.

After the Procedure

Though you will feel stronger as you go home, you should plan on resting for the remainder of the day.

You may have a sore throat, bloating, or cramping. These are normal side effects and should disappear within 24 hours.

Your doctor will tell you how soon you can eat, drink, and resume your regular activities. Normally, you can eat after the procedure.

Call your doctor immediately if you notice any of the following:

1. You have trouble swallowing
2. You have throat, belly, or chest pain that keeps getting worse.
3. You are throwing up.



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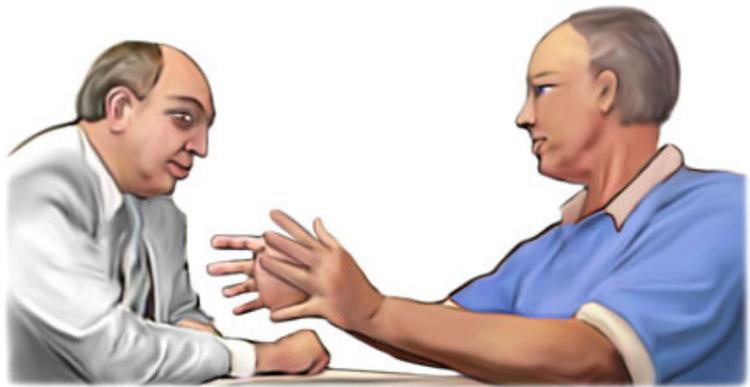
4. You have blood in your bowel movement. The feces would look black or very dark when they have blood in them.
5. You have a fever.

Conclusion

An EGD is a safe technique for examining the upper part of the digestive system. It can be used to diagnose and treat medical problems of the stomach and the duodenum.

It is important to communicate with your doctor about your health condition and medications you are taking. You should also not eat or drink anything 8 hours before the procedure. Some medical conditions, such as diabetes, will affect the length of time you may eat or drink, check with your doctor.

Thanks to advances in medical technology, endoscopy allows better diagnosis than X-ray. Endoscopy can also be used to treat some medical conditions thereby avoiding surgery.



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